

MA

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

RECEIVED

MAR 04 2011

3-4-11

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

Robert Tenny # N10482

(Enter above the full name
of the plaintiff or plaintiffs in
this action)

vs.

11 C 1548
Judge Charles R. Norgle, Sr
Magistrate Judge Arlander Keys

DR. PARTH GHOSH

MEDICAL DIRECTOR,

STATEVILLE CORR CENTER

MARK Hole, C.E.O., Wey-

ford Health Services, Inc.

(Enter above the full name of ALL
defendants in this action. Do not
use "et al.")

CHECK ONE ONLY:

☒

COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983
U.S. Code (state, county, or municipal defendants)

☐ COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE
28 SECTION 1331 U.S. Code (federal defendants)

☐ OTHER (cite statute, if known)

**BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR
FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.**

I. Plaintiff(s):

- A. Name: Robert Tenney
- B. List all aliases: _____
- C. Prisoner identification number: N10482
- D. Place of present confinement: Stateville Corr. Center
- E. Address: P.O. Box 112, Joliet, IL 60434

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, place of confinement, and current address according to the above format on a separate sheet of paper.)

II. Defendant(s):

(In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)

- A. Defendant: PARTH GHOSH
Title: MEDICAL DIRECTOR
Place of Employment: STATEVILLE CORR CENTER
- B. Defendant: MARK HOLE
Title: C.E.O
Place of Employment: WEXFORD HEALTH SOURCES, INC.
- C. Defendant: _____
Title: _____
Place of Employment: _____

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

III. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:

- A. Name of case and docket number: 10 C 3683
- B. Approximate date of filing lawsuit: JUNE 30, 2010
- C. List all plaintiffs (if you had co-plaintiffs), including any aliases: DERICK MORGAN, Lewis C. Henry, Clayborn Smith, Kelvin Norwood, Lynn Brooks, Johnnie Ross AND the Plaintiff here Robert Tenney.
- D. List all defendants: ROD R. Blagolevich, Derdre Battaglia, Jimmy Dominguez, Venita Wright, Terry McCann, Roger Walker, Anthony Ramos, Mark Hosey, Marcus Hardy, Michael Ranette, Michael Harris, Milton Jones, Anthony Sorentino, Pedro Mata, Francine McKeuzie, + Fredrick Doe
- E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): Federal District Court, Northern District
- F. Name of judge to whom case was assigned: Judge, Charles Norgle
- G. Basic claim made: Charging Commissionary prices items beyond the statutory authorize mark-up
- H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): CASE WAS DISMISSED, AND IS NOW PENDING ON APPEAL.
- I. Approximate date of disposition: JUNE 30, 2010

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

The Plaintiff was examined at the Prison Institutional Health Unit for Prostate Cancer in 2007. The medical Records reveals as a result of that examination Plaintiff's prostate was enlarged and P.S.A level was 3.6.

During a check up by Dr Zang in 2008 she noticed my last P.S.A level taken in 2007 and recommended that Plaintiff be examined again. That prescribed treatment interferred with by Dr Ghosh who examined Plaintiff and determined that Plaintiff's prostate was enlarged and that Plaintiff's P.S.A level had risen to 4.0 and rising. At this time Dr. Ghosh refused to send Plaintiff to the UIC Medical Hospital to see an urologist for biopsy. However, after repeated complaints, Dr. Ghosh on 9-28-08, intentionally provided grossly inadequate treatment when he sent Plaintiff to the prison institution N.R.C. Medical Unit knowing very well that the prison Medical Personnel cannot treat anyone for prostate cancer. The Plaintiff was sent back to his unit without any explanation from Dr. Ghosh.

On May 22, 2009, finally and after several complaints, Plaintiff was sent to the UIC. Yet Plaintiff was not treated because Dr. Ghosh intentionally, deliberately and with reckless disregard to Plaintiff's serious medical needs did not provide the UIC officials with the proper reports

of why the Plaintiff was there. Once again, interfered delay intentionally Plaintiff Access to Medical Care, And providing grossly inadequate treatment from Dr. Ghosh. Plaintiff was returned back to his Unit without any explanation from Dr. Ghosh.

On August 3, 2009, Plaintiff was sent back to the UIC; examined by an urologist who told Plaintiff that his prostate was enlarged, but that according to the information the prison had provided there was no information that would inform them of my P.S.A level. Due to Dr. Ghosh's intentional, interfered delay of Access to Medical Care Plaintiff was scheduled to return in six months in which case it will be determined if a Biopsy would be performed. However, Plaintiff per Dr. Ghosh intentionally interfered delay of Access to Medical Care did not return to the UIC until 9 month later after repeated complaints for about 80 days from the Plaintiff.

The UIC urologist informed Plaintiff that his P.S.A level had risen out of range to 5.4 and was up and down between 5.4 and 5.6. From that standpoint it was determined that Plaintiff be given a Biopsy to determine if he has prostate cancer. On 7-29-10 a Biopsy was performed and it was determined that Plaintiff had Prostate Cancer.

The Plaintiff is Alleging that from the first date he was informed about his prostate condition. Plaintiff has been intentionally denied Access to Medical Care by Dr. Ghosh as to the scheduling treatment and the results of his P.S.A levels. In between these sequences of events the Plaintiff's P.S.A levels risen from 3.6 to 5.6, and a Biopsy that shows that Plaintiff has, Continue on Page 7

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

Plaintiff is Suing Defendant w his Individual Capacity

Plaintiff is seeking Compensatory And Punitive Damages

Declaratory And Preliminary Injunctions

VI. The plaintiff demands that the case be tried by a jury. ☒ YES ☐ NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 23 day of February, 20 11

Robert Lewis

(Signature of plaintiff or plaintiffs)

Robert Tenny

(Print name)

N10482

(I.D. Number)

Stateville Corr. Center

P.O. Box 112, Joliet, IL 60434

(Address)

Continued from Page 5

Prostate cancer. In regards to Plaintiff's medical concerns, Plaintiff filed Institutional Grievances on 9-11-08, exhibit 2A, 7-9-08, exhibit 3, 4-28-09 exhibit 4, 7-9-09 exhibit 3. Plaintiff wrote letters to Dr. Ghosh on 4-28-09, and 6-24-09 exhibits 5 & 6 wrote letter to the warden on 7-8-09 exhibit 4. Plaintiff also wrote letters to Dr. Ghosh's Employers Wexford Health Services, Inc, Mr. Mark Hale on 9-30-08 and 5-23-08 complaining about Dr. Ghosh's intentionally deliberately and reckless disregard to my medical needs on both occasions Plaintiff received no response.

In light of Dr. Ghosh's indifference to Plaintiff's medical needs. Plaintiff filed an emergency grievance to the prison warden requesting that he be returned to the U.P.C. Medical Hospital for further procedures, as recommended, and that in the meantime Dr. Ghosh inform Plaintiff of the status of his appointment and of Plaintiff's last P.S.A test level taken at the prison Lab.

On 4-23-10, Dr. Ghosh's response to the emergency grievance was that the "test came back normal, we do not call them to the HCU for normal results only abnormal results. He can request a copy of his lab work per med. records" Exhibit A

The Plaintiff made that request and it was determined that the last P.S.A Lab test taken on 2-5-10 and 5-11-10 shows that the P.S.A levels were abnormal at 5.6 and 5.4. Simply put Dr. Ghosh's response to the emergency grievance was false and misleading. Exhibits 1A, 1B, & 1C

It becomes very clear that Dr. Ghosh from start to finish were indifferent to my serious medical needs.

Since the first time Plaintiff was examined for prostate cancer at the prison on 2-17-08 and it was recommended at that time Plaintiff should be treated by an urologist for a biopsy. That treatment did not take place until 7-29-10 over two years later. As a result showing an increase in the PSA level between 2007 (PSA level being 3.6 and 2010 (PSA level being 5.6. And prostate cancer.

It may also be noted that since Plaintiff has learned the true results of his PSA levels test taken on 2-5-10 AND 5-11-10 AND has learned that he has prostate cancer. Plaintiff has filed another institutional grievance dated 11-26-10 pleading with Dr. Ghosh to explain, among other things, but most important, why would he deliberately misrepresent in my grievance filed 3-29-10 that my PSA levels were normal knowing very well they were not. Dr. Ghosh has yet to respond to the grievance filed. Exhibit 7

WHEREFORE, Dr. Ghosh has repeatedly acted with deliberate indifference by knowingly exposing Plaintiff to increased levels of PSA AND A cancerous prostate that pose an unreasonable risk of serious damage to Plaintiff's future health.

COUNT 11

~~Approximately from~~

CONSPIRACY

VIOLATION OF 42 U.S.C. § 1983 & 1985(3)

Approximately from September 9, 2008 AND May 22, 2009, Plaintiff attempted to communicate with Mr. Mark Hole, by mail. Mr. Hole is CEO of Wexford Health Services, AND is Dr. Ghosh's employer. ON both occasions Plaintiff complained to Mr. Hole about Dr. Ghosh's reckless disregard AND ^{indifference} deliberate to Plaintiff medical needs. Plaintiff pleaded with Mr. Hole to intercede on his behalf. At no time did Mr. Hole respond in writing or in person. In fact Dr. Ghosh's indifference has continued up to this moment. Exhibit E AND F

The plaintiff avers that Mr Hale and Dr Ghosh acted in concert with each other at all times relevant hereto and combined and agreed with each other to violate plaintiff's constitutional and civil rights. These rights include but are not limited to the right to be free from deliberate indifference to medical needs by those acting under color of law and the right to be free from cruel and unusual punishment. In furtherance of these combined objectives the following acts were committed by the defendants as specifically alleged below:

- A). Intentionally and with reckless disregard failed to supervise Dr Ghosh in the handling of the plaintiff.
- b). Intentionally and with reckless disregard failed to stop Dr. Ghosh from repeated disregard to plaintiff's medical needs.

As a result of defendant's conduct, the plaintiff has suffered greatly; mentally and physically in deprivation of his constitutional rights

WHEREFORE, plaintiff prays this court will award him compensatory and punitive damages, cost and reasonable attorney fees.

A1

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

Date: <u>3-29-10</u>	Offender: <u>Robert Tenney</u> <small>(Please Print)</small>	ID#: <u>N10482</u>
Present Facility: <u>Stateville Corr. Center</u>		Facility where grievance issue occurred: <u>Stateville Corr. Center</u>

NATURE OF GRIEVANCE:

<input type="checkbox"/> Personal Property	<input type="checkbox"/> Mail Handling	<input type="checkbox"/> Restoration of Good Time	<input type="checkbox"/> Disability
<input type="checkbox"/> Staff Conduct	<input type="checkbox"/> Dietary	<input checked="" type="checkbox"/> Medical Treatment	<input type="checkbox"/> HIPAA
<input type="checkbox"/> Transfer Denial by Facility	<input type="checkbox"/> Transfer Denial by Transfer Coordinator	<input type="checkbox"/> Other	Specify: <u>0226</u>

☐ Disciplinary Report: _____ Date of Report: _____ Facility where issued: _____

Received
Grievance Office
APR 23 2010
STA #: _____

Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.

Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to:

Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board.
Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor.
Chief Administrative Officer, only if EMERGENCY grievance.
Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.

Brief Summary of Grievance: On August 3, 2009, I was sent to the University of Illinois-Chicago (UIC) to see an urologist for prostate examination. It was determined that I had swollen prostate glands, and that my PSA was at 4. Something, I was told by the urologist that I would be brought back in 6 months, in which case, we would determine the next procedure to be taken, including the possibility of having a biopsy performed to determine if the swollen glands are cancerous.

6 mos. On February 5 or 9, 2010, I was called to the Laboratory here at Stateville's Health Unit. I was given a PSA test, including urine. Since that time I have written to Dr. Ghosh inquiring about the status of my situation, and has received no response. I have been waiting patiently, and hopefully.

Relief Requested: Return to the UIC for further procedures, and in the meantime Dr. Ghosh inform me of the status of my last PSA test and my UIC schedule.

☒ Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.

Robert Tenney N10482 3,29,10
Offender's Signature ID# Date

(Continue on reverse side if necessary)

Counselor's Response (if applicable)	
Date Received: <u>4,23,10</u>	<input type="checkbox"/> Send directly to Grievance Officer <input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277
Response: <u>None - no to ensure follow-up was completed. Tests came back normal, we do not call them to the HU for normal results, only abnormal results. He can request a copy of his lab work - per Med. Records</u>	
<u>David Mansfield CCI</u> <small>Print Counselor's Name</small>	<u>David Mansfield CCI</u> <u>4,23,10</u> Counselor's Signature Date of Response

EMERGENCY REVIEW	
Date Received: <u>4/12/10</u>	Is this determined to be of an emergency nature?
	<input checked="" type="checkbox"/> Yes; expedite emergency grievance <input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.
<u>Marcus Hardy</u> <small>Chief Administrative Officer's Signature</small>	<u>4,12,10</u> Date

ILLINOIS DEPARTMENT OF CORRECTIONS
RESPONSE TO COMMITTED PERSON'S GRIEVANCE

Grievance Officer's Report

Date Received: April 23, 2010 Date of Review: April 23, 2010 Grievance # (optional): 0226

Committed Person: Robert Terry ID#: N10482

Nature of Grievance: Medical

Filed Timely EMERGENCY_ENSURE FOLLOW UP

Facts Reviewed: Grievant alleges he had a PSA exam, never learned the status of the testing.

Counselor response: Tests came back normal, we do not call them to the HCU for normal results, only abnormal results. He can request a copy of his lab work. - Per Medical Records.

Grievance Officer finds the Counselor correctly addressed the issue. No further action necessary.

Recommendation: Grievance issue appears resolved.

Margaret Thompson

Print Grievance Officer's Name

Grievance Officer's Signature

(Attach a copy of Committed Person's Grievance, including counselor's response if applicable)

Chief Administrative Officer's Response

Date Received: 5-11-10 ☒ I concur ☐ I do not concur ☐ Remand

Comments:

Chief Administrative Officer's Signature

Date

Committed Person's Appeal To The Director

I am appealing the Chief Administrative Officer's decision to the Director. I understand this appeal must be submitted within 30 days after the date of the Chief Administrative Officer's decision to the Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277. (Attach a complete copy of the original grievance, including the counselor's response, if applicable, and any pertinent documents.)

Committed Person's Signature

ID#

Date



Illinois
Department of
Corrections

PAT QUINN
Governor

MICHAEL P. RANDLE
Director

1301 Concordia Court / P.O. Box 19277 / Springfield IL 62794-9277 / Telephone: (217) 558-2200 / TDD: (800) 526-0844

September 14, 2010

Robert Tenney
Register No. N10482
Stateville Correctional Center

Dear Mr. Tenney:

This is in response to your grievance received on May 26, 2010, regarding medical (Wants results, follow-up on tests, biopsy 0226), which was alleged to have occurred at Stateville Correctional Center. This office has determined the issue will be addressed without a formal hearing.

In your grievance appeal you state the Grievance Officer did not address your questions regarding a biopsy you want done to check your prostate for cancer. You also wanted to know why test results had not been shared with you.

The Grievance Officer's Report and subsequent recommendation dated April 23, 2010 and approval by the Chief Administrative Officer on May 11, 2010 have been reviewed.

It is noted the PSA test your refer to was normal and no follow-up required per health care staff.

Based on a total review of all available information, it is the opinion of this office that the issue was appropriately addressed by the institutional administration. It is, therefore, recommended the grievance be denied.

FOR THE BOARD:

Brian Fairchild
Administrative Review Board
Office of Inmate Issues

CONCURRED:

Michael P. Randle
Director

TH
9/17/10

cc: Warden Marcus Hardy, Stateville Correctional Center
Robert Tenney, Register No. N10482

Stateville-Routine16300 S. Route 53
Cresthill, IL 60435**University of Illinois Medical Center
Reference Laboratory**840 South Wood Street,
Room 170 (M/C 750)
Chicago, Illinois 60612
Frederick Behm, MD Director

PATIENT NAME TENNEY, ROBERT N10482		PATIENT ID A209-10482		DOB 06/11/1952	SEX M	STATUS Final	DESTINATION
PHYSICIAN GHOSH, PARTHASARATHI		COLLECT DATE & TIME 02/05/2010 09:35		DATE OF SERVICE 02/05/2010 21:21		PRINTED ON 04/09/2010 14:11	PAGE 1
REQUISITION NO. A209.1175	PT.LAB NO.	LAB REF NO.					

FASTING: U

COMMENTS: F24322:PSA, UA

Diagnostic Procedure	Result		Units	Reference Range
	In Range	Out of Range		
PROSTATE SPECIFIC AG		5.6 H	NG/ML	0.0-3.9
URINALYSIS				
URINE COLOR	YELLOW			
URINE CLARITY	CLEAR			
URINE SP GRAV	1.018			1.003-1.035
URINE PH	5.5			5.0-8.0
URINE PROTEIN	NEGATIVE		MG/DL	NEG
URINE GLUCOSE	NEGATIVE		MG/DL	NEG
URINE KETONES	NEGATIVE		MG/DL	NEG
URINE BILIRUB	NEGATIVE			NEG
NITRITE	NEGATIVE			NEG
UROBILINOGEN	1		EU/DL	0.1-1
URINE BLOOD	NEGATIVE			NEG
LEUK ESTERASE	NEGATIVE			NEG

End of Report

761
4/9/10

Stateville-Routine
16300 S. Route 53
Cresthill, IL 60435



840 South Wood Street
Room 170 (M/C 750)
Chicago, Illinois 60612
Ph # (877)FOR-LABS
Lanne Maes, M.D., Director

FASTING: U

PATIENT NAME TENNEY, ROBERT N10482		PATIENT ID A209-10482	DOB 06/11/1952	SEX M	STATUS Final	DESTINATION D209
PHYSICIAN GHOSH, PARTHASARATHI		COLLECT DATE & TIME 05/11/2010 10:40	DATE OF SERVICE 05/11/2010 23:37		PRINTED ON 05/12/2010	PAGE 6:02 1
REQUISITION NO. A209.1813	PT. LAB NO.	LAB REF NO.				

COMMENTS:

Diagnostic Procedure	Result		Units	Reference Range
	In Range	Out of Range		
PROSTATE SPECIFIC AG		5.4 H	NG/ML	0.0-3.9

End of Report

76/
6/16/10

EMERGENCY REVIEW	
Date Received: / /	Is this determined to be of an emergency nature? <input type="checkbox"/> Yes; expedite emergency grievance <input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.
_____ Chief Administrative Officer's Signature	_____ Date

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

that I had not returned to the HIC As recommended. I was seeking a response from Dr. Ghosh, as to an update on my status. His reply was that test came back normal, do not call them to HIC for normal results only abnormal results.

On Aug. 13, 2010, I requested a relief of my medical records taken on or around Feb 5, 09 and the report dated Feb. 5, 2010 my PSA level was 5.6. It out of range.

So, if this is the case then Dr. Ghosh misrepresented the fact that my medical condition was not normal but abnormal, 5.6. It.

So, since the first time I was examine for prostate on Feb. 17, 2008, and it was determined at that time I should received treatment from an urologist.

That treatment did not take place until July 19, 2010, over two years later I had a biopsy performed. eight 8 pieces of skin was extract from my prostate gland, I was told that it would takes them up to two weeks for a results.

I was not returned to the HIC until Nov. 17, 2010 for my biopsy results and was told by Dr. Deane and his staff that out of the 8 samples extracted from me, one signaled a malignant of cancer and at this point it will be monitored every 60 days before determining if therapy is needed.

My complaint against Dr. Ghosh is that his obvious and total disregard and deliberates to my medical condition that I have demonstrated in this grievance has caused a life threatening lipos myself now, or in the future.

Besides filing grievances against Dr. Ghosh I wrote personal letters to him, pleading that he act as swiftly as possible to my condition at no time did he ever respond.

I also wrote letters and file 2 grievances with the administrative officers here at the institutions.

Robert TENNY #N10482
Stateville Corr. Center
D-House #735
7-8-09

TO. WARDEN, SHAW
Stateville Corr. Center

Dear Warden Shaw, I am contacting you out of a matter of great concern to me.

That on May 22, 2009, I was sent to the University of Illinois, NIC for an ultra sound regard swelling of my prostate glands. I was told by the physician that he would have to make a call back to Stateville and speak with Dr. Ghosh because he couldn't determine from the paper work on what procedure to follow. After speaking with Dr. Ghosh they rescheduled me to see an urologist. Since that time I have not returned to the NIC, nor do I have any idea if and when will I return. I have written Dr. Ghosh on June 24, 2009 asking him is he aware of my position. To this date he has not responded. I don't have to tell you how serious this is and why I am greatly concern. Could you please do something for me. Thank you

Sincerely
Robert Tenny
Robert TENNY #N10482

Exhibit 4

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

Date: 4-28-09	Offender: (Please Print) Robert Tenny	ID#: N10482
Present Facility: Stateville Corr. Center	Facility where grievance issue occurred: Stateville Corr Center	

NATURE OF GRIEVANCE:

<input type="checkbox"/> Personal Property	<input type="checkbox"/> Mail Handling	<input type="checkbox"/> Restoration of Good Time	<input type="checkbox"/> Disability
<input type="checkbox"/> Staff Conduct	<input type="checkbox"/> Dietary	<input checked="" type="checkbox"/> Medical Treatment	<input type="checkbox"/> HIPAA
<input type="checkbox"/> Transfer Denial by Facility	<input type="checkbox"/> Transfer Denial by Transfer Coordinator	<input type="checkbox"/> Other (specify): _____	

☐ Disciplinary Report: _____
Date of Report: _____ Facility where issued: _____

Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.

Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to:
 Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board.
 Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor.
 Chief Administrative Officer, only if EMERGENCY grievance.
 Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.

Brief Summary of Grievance: Dear Warden Shaw, I am filing this grievance with you out of a need of urgency. I have been scheduled twice to attend the University of Illinois (U.I.C.) for an ultrasound for prostate exam do to swollen. Once by Dr Zane on February 12, 2008, and again by Dr Ghosh on February 16, 2009. To this date I have not heard or been told by security that I am scheduled to go. My urgency is that lately I have experiencing bleeding in my bowel movement.


Relief Requested: To order the Health Unit and or security to get me to the U.I.C. as soon as possible. My fear is that my problem is a serious one.

☒ Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.

Robert Tenny **N10482** **4,28,09**
Offender's Signature ID# Date

(Continue on reverse side if necessary)

Counselor's Response (if applicable)		
Date Received: _____	<input type="checkbox"/> Send directly to Grievance Officer	<input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 18277, Springfield, IL 62784-9277
Response: _____ _____ _____ _____		
Print Counselor's Name	Counselor's Signature	Date of Response

EMERGENCY REVIEW	
Date Received: 5.7.09	Is this determined to be of an emergency nature? <input type="checkbox"/> Yes; expedite emergency grievance
	<input checked="" type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.
Chief Administrative Officer's Signature	5.7.09 Date

*Atul/King Following w/Henry
GIR*

ROBERT TENNY #N10482

STATEVILLE CORR CENTER

D-HOUSE CELL # 747

DATE: 4-28-09

Exhibit 5

To: Dr Parth Ghosh
 Medical Director
 Stateville Corr. Center.

Dear Dr. Ghosh, I am writing to you out of a
 matter of great concern.

My last appointment with you was February 16, 2009.
 On that date you scheduled me to be sent to the
 University of Illinois, Chicago (U.I.C) for an ultra
 sound for swollen prostate. To this date I have
 not heard, or been told that I am scheduled to
 go. Recently, I have been bleeding during
 bowel movement which concerns me a great
 deal. Could you please respond to me as soon
 as possible. Thank you.

Sincerely

Robert Tenny

Robert Tenny #N10482

SENT TO
 U.I.C. FOR 5-22-09
 Treatment Rescheduled
 date unknown, TENNY

YOUR APPT IS PENDING PER
 UIC. 5/1/09

D747

1/11 Tenney, Robert N10482

To Dr. Parth Ghosh
Medical Director
Health Unit

EXHIBIT 6

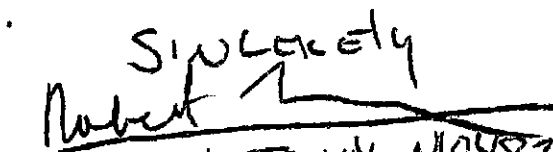
ROBERT TENNY #10482
STATEVILLE CORR. CENTER
D-HOUSE, CELL #747
6-24-09

TO. MR. PARTH GHOSH
MEDICAL DIRECTOR
STATEVILLE CORR. CENTER.

DEAR MR. GHOSH,

ON MAY 22, 2009, I WAS TAKEN TO THE UNIVERSITY OF ILLINOIS, CHICAGO [U.I.C.] FOR TREATMENT FROM PROSTATE COMPLICATIONS. THE PROCEDURE WAS TO BE FOR ULTRASOUND. HOWEVER, THE MEDICAL PERSONNEL THERE WAS UNSURE OF WHAT PROCEDURE TO FOLLOW. THEY CALLED BACK HERE TO THE INSTITUTION TO TALK WITH YOU. AFTER TALKING WITH YOU, I WAS INFORMED THAT I WOULD BE RESCHEDULED FOR AN APPOINTMENT TO SEE THE UROLOGIST.

I WAS WONDERING IF YOU WERE AWARE OF THIS, IF NOT WOULD YOU LOOK INTO IT, AND SEE THAT I AM ON ORDER TO RETURN BACK TO THE U.I.C. I AM VERY CONCERNED ABOUT MY CONDITION. THERE HAS BEEN YEARS OF DELAY. THANK YOU.

Sincerely

ROBERT TENNY #10482

2A

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

D-747

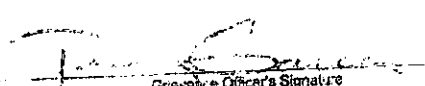
Date: <u>9-11-08</u>	Offender: (Please Print) <u>ROBERT TENNY</u>	ID#: <u>N10482</u>
Present Facility: <u>Stateville Corr. Center</u>		Facility where grievance issue occurred: <u>Stateville Corr. Center</u>
NATURE OF GRIEVANCE:		
<input type="checkbox"/> Personal Property <input type="checkbox"/> Mail Handling <input type="checkbox"/> Restoration of Good Time <input type="checkbox"/> Disability <input type="checkbox"/> Staff Conduct <input type="checkbox"/> Dietary <input checked="" type="checkbox"/> Medical Treatment <input type="checkbox"/> HIPAA <input type="checkbox"/> Transfer Denial by Facility <input type="checkbox"/> Transfer Denial by Transfer Coordinator <input type="checkbox"/> Other (specify): <input type="checkbox"/> Disciplinary Report: _____ Date of Report: _____ Facility where issued: <u>1436</u>		
<p>Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.</p> <p>Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to: Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board Grievance Officer, only if the issue involves discipline at the present facility, or issue not resolved by Counselor. Chief Administrative Officer, only if EMERGENCY grievance. Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.</p>		
<p>Brief Summary of Grievance: <u>ON Aug. 14, 2008, I WAS EXAMINED BY A PHYSICIAN AT THE HEALTH UNIT GO TO A lump beneath my skin in my abdomen. I WAS told that it WAS A mild hernia which would NOT require surgery.</u></p> <p><u>ON Aug. 17, 2008, I wrote Dr. Ghosh, medical Director at Stateville's health unit. Asking would he schedule me for an X-ray, or ultrasound which would determine the extent of my ailment including an accurate diagnosis of what may truly be my problem. It has also been determined that a lump under your body skin can be cancerous.</u></p> <p>Relief Requested: <u>That I be scheduled and given X-rays and or an ultrasound for the above-mentioned cancer.</u></p>		
<input type="checkbox"/> Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self		
Offender's Signature: <u>Robert Tenny</u>		ID#: <u>N10482</u> Date: <u>9.12.08</u>
(Continue on reverse side if necessary)		


Counselor's Response (if applicable)		
Date Received: <u>9.16.08</u>	<input type="checkbox"/> Send directly to Grievance Officer <input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277	
Response: <u>Offender was seen on 8/14/08. Offender will be scheduled for sick call follow-up with Dr. [Signature]</u>		
Print Counselor's Name: <u>L. Dennis</u>	Counselor's Signature: <u>[Signature]</u>	Date of Response: <u>9.16.08</u>

EMERGENCY REVIEW	
Date Received: _____	Is this determined to be of an emergency nature?
	<input type="checkbox"/> Yes; expedite emergency grievance <input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.
Chief Administrative Officer's Signature: _____	Date: _____

Exhibit
2a

ILLINOIS DEPARTMENT OF CORRECTIONS
RESPONSE TO COMMITTED PERSON'S GRIEVANCE

Grievance Officer's Report	
Date Received: <u>September 17, 2008</u>	Date of Review: <u>September 17, 2008</u>
Grievance # (optional): <u>1436</u>	
Committed Person: <u>Robert Tenny</u>	
ID#: <u>N10482</u>	
Nature of Grievance: <u>Medical tx</u>	
<p>Facts Reviewed: Grievant alleges having a mild hernia and it did not require surgery. He states requesting x-rays and ultrasounds to rule out cancer</p>	
<p>Counselor Response: Offender was seen on 8-14-08. Offender will be scheduled for a sick call follow up with Dr. Young</p>	
<p>This Grievance Officer reviewed grievance and finds issue appears to be resolved</p>	
<p>Recommendation: No further actions</p>	
<u>Tenny Garcia</u> <small>Print Grievance Officer's Name</small> <small>(Attach a copy of Committed Person's Grievance, including counselor's response, if applicable)</small>	 <small>Grievance Officer's Signature</small>

Chief Administrative Officer's Response		
Date Received: <u>9-24-08</u>	<input checked="" type="checkbox"/> I concur <input type="checkbox"/> I do not concur <input type="checkbox"/> Remand	
<p>Comments:</p> <div style="text-align: center; margin-top: 50px;">  <small>Chief Administrative Officer's Signature</small> </div> <div style="text-align: right; margin-top: 10px;"> <u>9-24-08</u> <small>Date</small> </div>		

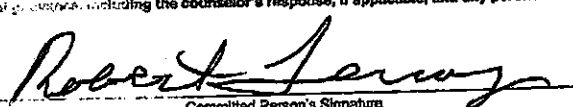
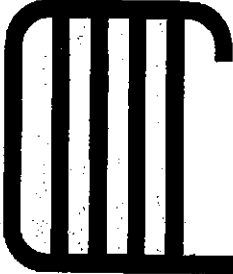
Committed Person's Appeal To The Director		
<p><small>I am appealing the Chief Administrative Officer's decision to the Director. I understand this appeal must be submitted within 30 days after the date of the Chief Administrative Officer's decision to the Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277. (Attach a complete copy of the original grievance including the counselor's response, if applicable, and any pertinent documents.)</small></p>		
 <small>Committed Person's Signature</small>	<u>N10482</u> <small>ID#</small>	<u>9/24/08</u> <small>Date</small>

Exhibit
2.8

RECEIVED from private counsel
ON March 27, 2009



Illinois
Department of
Corrections

PAT QUINN
Governor

Roger E. Walker Jr.
Director

1301 Concordia Court / P.O. Box 19277 / Springfield IL 62794-9277 / Telephone: (217) 558-2200 / TDD: (800) 526-0844

March 18, 2009

Robert Tenney
Register No. N10482
Stateville Correctional Center

Dear Mr. Tenney:

This is in response to your grievance received on October 16, 2008, regarding Medical (was diagnosed with a small hernia and wants an ultrasound or x-ray to see the extent of issue), which was alleged to have occurred at Stateville Correctional Center. This office has determined the issue will be addressed without a formal hearing.

The Grievance Officer's report, 1436 and subsequent recommendation dated September 17, 2008 and approval by the Chief Administrative Officer on September 24, 2008 have been reviewed.

Records indicate you were seen by Dr. Zang on September 18, 2008 for right groin hernia which was small and reducible. You were seen again on January 13, 2008. Per medical records a request was made for an Ultrasound of Prostate at UIC on February 17, 2008.

Based on a total review of all available information, it is the opinion of this office that the issue was appropriately addressed by the institutional administration. It is, therefore, recommended the grievance be denied.

FOR THE BOARD:

Sarah Johnson

Sarah Johnson
Administrative Review Board
Office of Inmate Issues

CONCURRED:

R. E. Walker Jr.

Roger E. Walker Jr.
Director

79
3/23/09

cc: Acting Warden Frank Shaw, Stateville Correctional Center
Robert Tenney, Register No. N10482

STATEVILLE CORRECTIONAL CENTER

Notification of Appointment to HCU

Name TENNEY, R Number N10482 Date: 9/22/08
 Cell D 0747 Time to Report 10:00 AM Assignment _____

___ LAB X X-RAY ___ DIETITIAN ___ SEIZURE CLINIC ___ OTHER
 ___ E.R. ___ OPHTH ___ INF.ADMIT ___ DIABETIC CLINIC
 ___ P.T. ___ ORTHO ___ MD in E.R. ___ HYPERTENSIVE CLINIC
 ___ OPT ___ DENTAL ___ ASTHMA CLINIC ___ INFEC. CONTROL
 ___ POD ___ PHYSICALS ___ SURGERY CLINIC ___ MENTAL HEALTH _____

Special Instructions:

___ NPO - (Nothing by Mouth After 12:00 Midnight)

___ I accept this pass

Inmate Signature

___ I Refuse this Assignment

Inmate Signature

If you are on a psychotropic medication, this will be discontinued or tapered off if you do not come to your next scheduled appointment.

___ Reason for refusal _____

___ Witness _____

CMT Signature

*If you fail to keep this appointment (NO SHOW) you will have to reschedule your own appointment through the CMT.

___ NO SHOW

Attempts to deliver this pass made at the following times:

P.M.s _____ Reason not delivered _____
 MIdnights _____ Reason not delivered _____

___ R.N. Notified of inability to deliver pass

Signature of CMT _____ P.M. _____ M.N. _____
 Signature of R.N. _____ P.M. _____ M.N. _____

Time inmate departed Assignment _____ Officer _____
 Time inmate arrived at HCU _____ Officer _____
 Time inmate departed HCU _____ Officer _____
 Time inmate arrived Assignment _____ Officer _____

IL426

DCA2234 (Rev 4/93)

Exhibit

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

Date: <u>7-9-09</u>	Offender: (Please Print) <u>ROBERT TENNY</u>	ID#: <u>N10488</u>
Present Facility: <u>SHREVEPORT CORR CENTER</u>	Facility where grievance issue occurred: <u>SHREVEPORT CORR CENTER</u>	

NATURE OF GRIEVANCE:

<input type="checkbox"/> Personal Property	<input type="checkbox"/> Mail Handling	<input type="checkbox"/> Restoration of Good Time
<input type="checkbox"/> Staff Conduct	<input type="checkbox"/> Dietary	<input checked="" type="checkbox"/> Medical Treatment
<input type="checkbox"/> Transfer Denial by Facility	<input type="checkbox"/> Transfer Denial by Transfer Coordinator	<input type="checkbox"/> Other
<input type="checkbox"/> Disciplinary Report: _____		

Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.

Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to:
Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board.
Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor.
Chief Administrative Officer, only if EMERGENCY grievance.
Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.

Brief Summary of Grievance: ON MAY 22, 2009, I WAS SENT TO THE UNIVERSITY OF ILLINOIS, CHICAGO TO HAVE ULTRA SOUND TO DETERMINE SWELLING OF PROSTATE GLAND. THE PHYSICIAN TOLD ME THAT HE WOULD HAVE TO CALL BACK TO SHREVEPORT AND TALK WITH DR. GHOSH BECAUSE FROM HIS PAPERWORK HE WASN'T SURE OF WHAT PROCEEDURE TO FOLLOW. AFTER SPEAKING WITH DR. GHOSH THE PHYSICIAN TOLD ME THAT WE HAD SPOKEN WITH DR. GHOSH AND IT IS DETERMINED THAT I WAS TO RELIEVE AN UROLOGIST AND THAT THEY WOULD HAVE TO REEXAMINE ME. TO THIS DAY I HAVE HEARD ANYTHING. I HAVE WRITTEN TO DR. GHOSH FOR SOME INFORMATION AND

Relief Requested: TO TALK WITH DR. GHOSH, AND LET ME KNOW IF I WILL BE RETURNING TO I.C. TO SEE UROLOGIST. THANK YOU

☐ Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.

Robert Tenny NOV 7 9 09
Offender's Signature Date

(Continue on reverse side if necessary)

Counselor's Response (if applicable)		
Date Received: <u>7.18.09</u>	<input type="checkbox"/> Send directly to Grievance Officer	<input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 10277, Springfield, IL 62784-9277
Response: <u>Forwarded to HCU for response.</u> <u>Copy sent to offender and grievance office.</u> <u>Inmate has been referred back to UIC-Urology</u>		
<u>D. Fair</u> Print Counselor's Name	<u>N. Fair A/CC</u> Counselor's Signature	<u>7.18.09</u> Date of Response

EMERGENCY REVIEW	
Date Received: _____	Is this determined to be of an emergency nature?
	<input type="checkbox"/> Yes; expedite emergency grievance
	<input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.
_____ Chief Administrative Officer's Signature	_____ Date

ILLINOIS DEPARTMENT OF CORRECTIONS
RESPONSE TO COMMITTED PERSON'S GRIEVANCE

Grievance Officer's Report

Date Received: July 20, 2009

Robert Tenny

Date of Review: September 21, 2009

Grievance # 1831

Nature of Grievance: Medical TX

N10482

*** FILED TIMELY ***

Facts Reviewed: Grievant states he has not had a follow up visit to the Urologist at UIC as it was recommended on his last visit.

Grievance written: 7/9/09

Sent to HCU: 7/18/09

Counselor response; Inmate has been referred back to UIC Urology 8/3/09.

This Grievance Officer has no medical expertise or authority to contradict the doctor's recommendation/diagnosis. OTS shows a medical furlough took place on 8/3/09. It appears that medical needs have been met.

Recommendation: No further recommendations necessary.

Shaun Bass CCI

Print Grievance Officer's Name
(Attach a copy of Committed Person's Grievance, including counselor's response if applicable)

Grievance Officer's Signature

Chief Administrative Officer's Response

Date Received: 9/20/09

Comments:

☒ I concur☐ I do not concur☐ Remand

Chief Administrative Officer's Signature

Committed Person's Appeal To The Director

I am appealing the Chief Administrative Officer's decision to the Director. I understand this appeal must be submitted within 30 days after the date of the Chief Administrative Officer's decision to the Administrative Review Board, P.O. Box 19277, Springfield, IL 62784-9277. (Attach a complete copy of the original grievance, including the counselor's response, if applicable, and any pertinent documents.)

Committed Person's Signature

ID#

Date

Distribution: Master File; Committed Person

Exhibit

E

ROBERT TENNY #N10482
Stateville Corr. Center

P.O. Box 112

Joliet, IL. 60434

Date: 9-30, 2008

TO: Mr. Mark Hole
C.E.O. Wexford Health Sources, Inc.
Foster Plaza two, 425 Holiday Dr.
Pittsburg, PA 15220

Dear Mr. Hole

I Am writing to you do to a complaint Against one of your employers namely Dr. Parth Ghosh who is Assigned as the Medical Director here at the Stateville corr. center of which I am confined.

ON 1-13-08, I WAS EXAMINED by Dr. Ghosh for prostate cancer. Dr. Ghosh determined that I had enlarged prostate and my PSA level was 4. And then Dr. Ghosh determined that I be sent to the UIC for Prostate treatment. That treatment according to medical records was to take place on 2-17-08. After several complaints to prison officials and Dr. Ghosh. I was sent to the NRC Health Unit here at the prison by Dr. Ghosh knowing very well the prison Health facilities cannot treat anyone for prostate cancer. This occurred on 9-22-08. I was sent back to my unit without any explanation from Dr. Ghosh, on when and if ever I will be sent to the UIC for my serious medical condition. Since this last irresponsible incident on the part of Dr. Ghosh I have written to him and as of this writing I have not gotten any response by Dr. Ghosh.

I would Ask you Mr. Hole to please contact Mr. Ghosh and intercede on my behalf that I get the proper medical treatment I need for my condition
Thank you.

Robert Tenny
ROBERT TENNY #N10482

Exhibit
F

ROBERT TENNY #N10482
Stateville Corrs Center
P.O. Box 112
Joliet, IL 60434
Date: 5-23-09

TO: MARK HOLE
CEO, Wexford Health Sources, Inc.
Foster Plaza Two, 425 Holiday Dr.
Pittsburgh, PA, 15220

Dear Mr. Hole

I AM Writing to for A second time With A complaint Against one of your employers namely Dr. Parth Ghosh. The same person named in my last complaint to you ON 9-30-08. Dr. Ghosh is Assigned As the Medical Director here at the Stateville Corrs Center, Where I Am Confined.

My Complaint is basically the same as before. Dr. Ghosh seems to be Unwilling to get his Act together. He Continues to Act intentionally deliberately And With Reckless disregard to my serious Medical Needs.

Over A Year of my Official Complaint Concerning my prostate And need for treatment I was sent to the UIC And was told that they could not treat me because ~~they~~ Dr. Ghosh did not supply them With the proper paper work. In otherwords UIC did not know what procedure to proceed With. I was sent back to the prison And to my unit Without Any explanation from Dr. Ghosh. I Am Asking, As I have done before would you Please Reprimand Dr. Ghosh And see to it that he proceed professionally And with deliberate speed in getting me the proper Medical treatment for prostate cancer I Am very concern at this moment. Thank you. Please Respond.

Robert Tenny
Robert Tenny #N10482

IN THE
Federal District Court
Seventh Circuit

ROBERT TENNY N10482, pro.se
Plaintiff,

v.

Parth Ghosh & MARK Hole
Defendant

)
)
) Case No. _____
)
)
)

PROOF/CERTIFICATE OF SERVICE

TO: Prisoner Correspondent
U.S. District Court
219 S. Dearborn Street
Chicago, IL, 60604

TO: _____

PLEASE TAKE NOTICE that on February 27, 2011, I have placed the documents listed below in the institutional mail at Stateville Correctional Center, properly addressed to the parties listed above for mailing through the United States Postal Service:

Civil Complaint Under 42 U.S.C. § 1983 AND Attached
documents in support thereof

Pursuant to 28 USC 1746, 18 USC 1621 or 735 ILCS 5/109, I declare, under penalty of perjury, that I am a named party in the above action, that I have read the above documents, and that the information contained therein is true and correct to the best of my knowledge.

DATE: 2-23-11

/s/ Robert Tenny
NAME: Robert Tenny
IDOC#: N10482
Stateville Correctional Center
P.O. BOX 112
Joliet, IL 60434